

Legal Compliance Audit Pre-Audit Questionnaire

Date: _____

Company Name: _____

Address: _____

Section 1: Company Information

Contact Person:

Contact Email:

Section 2: Compliance Areas

Please indicate your compliance status for the following areas:

Employment Law: Compliant Non-Compliant Not Applicable

Health and Safety Regulations: Compliant Non-Compliant Not Applicable

Section 3: Documentation

Please list any relevant documentation you have related to compliance:

Section 4: Additional Comments

Submit Questionnaire